| | VIII) | attitie in Lou | MP10-876 | ond to | A RECORD | inomation (| Office; U | S. DEPARTMEN Separe a valid Of Piloation or Dock | T OF COMMER AB control number | |
|---|--|------------------------------------|------------------|----------|-------------------|--------------------|-----------|--|----------------------------------|--|
| APPLICATION AS FILED - PART I (Column 1) (Column 2) | | | | - | SMALL ENTITY | | O. | R SMA | OTHER THAN SMALL ENTITY | |
| FOR. BASIC FEE (87 CFR 1.16(a), (b), or (d)) | NUMBER FILE | ED N | UMBER EXTRA | _ | RATE (\$) | FEE (| | RATE (\$) | | |
| 6EARCH FEE (87 OFR 1.(6(K), (1), or (m)) | | | • • | - | | | | | FEE (\$) | |
| EXAMINATION FEE (37 OFR 1.18(d), (p), or (qi) | | | · 13 | | | | | | | |
| TOTAL CLAIMS (37 CFR 1.16(1)) | minus | 20 = | | - | DE | - | | | | |
| INDEPENDENT CLAIMS (87 CFR 1.16(ti)) | | * = 88 | 1 | - | × 25= × /N= | - | OR | x 50 = | ŧ | |
| APPLICATION SIZE | If the specification sheets of paper, is \$250 (\$125.5) | and drawing | gs exceed 100 | 1 | X/VV = | | | x200= | | |
| FEE (37 CFR 1.16(s)) | additional 50 she 35 U.S.C. 41(a)(| ets or fraction (1)(G) and 37 (| for each | | | | | | | |
| MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR-1.16(1)) | | | | | 180 | | | 21.2 | | |
| If the difference in column 1 is less than zero, enter "0" in column 2. | | | | | TOTAL | | | 1860 | | |
| APPLICATE APPLICATE | TION AS AMEND | DED – PART | 11 | | • | : | | TOTAL | | |
| | Dlumn 1) | (Column 2) | (Column 3) | | SMALL E | ENTITY | · OR | OTHER | THAN | |
| RE | MAINING AFTER | HIGHEST NUMBER PREVIOUSLY | PŘESENT EXTRA | | PATE (\$) | ADD1: | 7 | SMALL | ENTITY | |
| Total Total For CFR 1.16(11) Independent Gor CFR L16(11) Application Size Fee C | NDMENT Minus | PAID FOR | = | | | TIONAL FEE (\$) | | RATE (\$) | ADDI- TIONAL FEE (\$) | |
| Independent (37 CFR L16(N)) | Minus Minus | - 70 | = | 7 | x 0/0 = | | OR | x \50 =. | 1 (4) | |
| (1.10(s)) | | | | | × 10 0 | <u> </u> | ÖR | x 0200 | , | |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(1)) | | | | | | OR | 360 | | | |
| | | • | | | OTAL ADD'L FEE | , | OR (| TOTAL ADD'L FEE | | |
| CL | umn 1) Alms | (Column 2) HIGHEST | (Column 3) | . | • | | | VOOTLEE T | | |
| AF | AMING TER IDMENT. | NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA | | RATE (\$) | ADDI- TIONAL | | RATE (\$) | ADDI- | |
| (97 CFR 1.16(1)) Independent | Minus | • | = | × | • | FEE (\$) | | | TIONAL FEE(\$) | |
| (17 CFR 1.16(h)) | Minus | *** | | | = | | | X = | | |
| Application Size Fee (3) | | • | | | | | OR | X | | |
| FIRST PRESENTATION OF | FMULTIPLE DEDENDE | H 101 444 445 | | | | | • • | | | |

If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".

The "Highest Number Previously Paid For" (Notal or Independent) is the highest number found in the appropriate box in column 1. This collection of Information is required by 37 CFR 1.16. The Information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS, SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1460.

TOTAL

ADD'L FEE

OR:

QR

TOTAL ADD'L FEE